

# Utah's Asthma Chronicle

## Inside this issue:

Asthma School Resource Manual... the first two years p 2.

CFC-free Inhalers, p 3.

New Staff p 3.

Asthma Task Force Spotlight p 4.

Is your asthma covered p 4.

Asthma at child care p 5

Story Bank p 6.

## Utah Asthma Program

Rebecca Giles, MPH  
Program Manager  
801-538-6259  
[rgiles@utah.gov](mailto:rgiles@utah.gov)

Ali Martin, BS  
Health Specialist  
801-538-6441  
[alimartin@utah.gov](mailto:alimartin@utah.gov)

Rebecca Jorgensen, BS  
Health Specialist  
801-538-9272  
[rjorgens@utah.gov](mailto:rjorgens@utah.gov)

Celeste Beck, MPH  
Epidemiologist  
801-538-6894  
[celestebeck@utah.gov](mailto:celestebeck@utah.gov)

# High 5



## The Utah Asthma School Resource Manual and Training turns 5!

**35** health education interns have trained **3,970** school faculty and staff and **272** schools about asthma.

The Utah Asthma School Resource Manual & Training is an asthma information manual and 45-minute training that interns or school nurses present to school faculty (teachers, office staff, custodians, kitchen staff, school nurses, etc.). The manual and training provide faculty with:

- Asthma basics;
- General emergency protocol for an asthma attack;
- How schools can be “asthma-friendly”; and
- Importance of asthma management teams



Utah Asthma Task Force  
[www.health.utah.gov/asthma](http://www.health.utah.gov/asthma)

# Asthma School Resource Manual.... the first two years!

.....

An evaluation was recently completed to assess the effectiveness of the Asthma School Resource Manual during the first two years of implementation, school years 2004-2005 and 2005-2006. Results of pre- and post-training surveys, intern evaluation reports, and an online survey were analyzed and developed into an evaluation report. A brief summary of the results is outlined below.

## School and staff participation

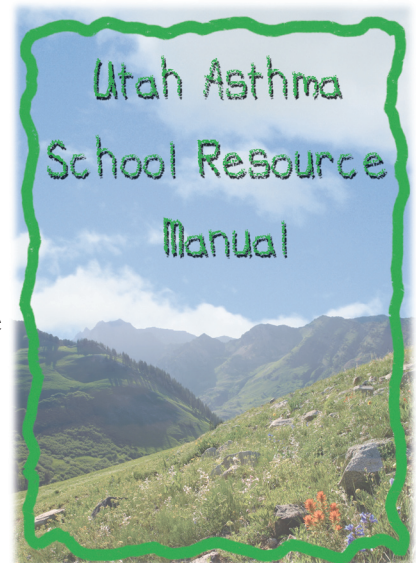
- 141 schools across 22 school districts in Utah received the manual and training
- 139 public schools, 1 charter, and 1 specialized school participated
- 87% of participating schools were at the elementary level
- 84% of contacted schools agreed to participate in the trainings
- Nearly 2,300 school staff members participated in the trainings
- 81% of participating school staff were teachers

## Impact of Training and Manual

- Approximately 90% of school staff reported an increase in their understanding of asthma and its triggers, and knowledge of what to do during an asthma attack
- 77% of school staff agreed that they felt able to use the Asthma School Resource Manual
- 82% of participating school staff viewed the Asthma School Resource Manual as an effective tool in helping to treat children with asthma
- Reported use of manual: rarely (60% of respondents), sometimes (17% of respondents), unknown (23% of respondents)
- In an online survey, up to 33% of schools reported having made improvements in various asthma management activities and policies as a direct result of the manual and training.

## Recommendations

- Asthma Task Force should develop additional methods for evaluating the long-term impact of the manual and training.
- Recommendations were made to improve the success of the intern trainings, such as arriving early to set up, preparing extra handouts, encouraging school nurse participation, and scheduling the trainings during mandatory school staff meetings.



## What are CFC-free Inhalers?

Many individuals using albuterol inhalers will need to change their inhalers by the end of this year. The FDA has given manufactures of albuterol inhalers until December 31, 2008 to stop using the ozone-depleting propellants, called chlorofluorocarbons (CFCs). Hydrofluoroalkane (HFA) inhalers are CFC-free inhalers that are safe, effective and ozone-friendly. An HFA inhaler may be more expensive than an individual's CFC inhaler, depending on insurance. Individuals who have not already switched to HFA inhaler will need to get a new prescription from their doctor.(a pharmacist cannot simply substitute a new inhaler for a CFC inhaler).



## Welcome New Asthma Epidemiologist

Celeste Beck is the new epidemiologist for the Utah Asthma Program. Celeste earned a BS degree in Exercise Science from Brigham Young University in 2006, and a Master of Public Health from the University of Utah in 2008. Her responsibilities include supporting projects by assisting with: data analysis, reports, planning, survey design, and evaluation. Since joining the staff in May, Celeste has provided the Asthma Task Force with much valuable information and feedback!

Celeste lives in Murray with her husband Ben. Hiking, camping, rock climbing, and playing tennis and racquetball are a few of her favorite pastimes. She also enjoys reading, shopping, and watching movies. Welcome Celeste to the Utah Asthma Program!



## Task Force Member Spotlight

Dr. Jeffery T. Zobell, Pharm.D. is a pediatric clinical pharmacist at Intermountain Primary Children's Medical Center, in Salt Lake City, Utah. He currently works in the Neonatal Intensive Care Unit/ Infant Unit. Dr. Zobell has been involved with the Intermountain Pediatric Cystic Fibrosis Center for the past 2 years by providing pharmacy services to Cystic Fibrosis patients seen in the clinic, and serving as the ambulatory care preceptor for pharmacy residents. He is actively involved in several quality improvement and research projects currently being conducted at the Cystic Fibrosis Center.

Dr. Zobell serves as a clinical adjunct faculty member of the University of Arizona College of Pharmacy and the University of Utah College of Pharmacy. He is the current chairman of the Utah Asthma Task Force Asthma Management (Pharmacy Project) Action Group, and is a ad hoc reviewer for the Cystic Fibrosis Therapeutic Drug Network.



Dr. Zobell completed a Pharmacy Practice Residency at Intermountain Primary Children's Medical Center. He graduated with his doctorate in pharmacy from the University of Arizona College of Pharmacy in May 2006.

Dr. Zobell is married with three children and currently resides in Kaysville, Utah.

## Is your asthma covered?

Have asthma and looking for new health insurance? Make sure your health insurance covers these important services and supplies:

### Checklist of Needed Coverage for Asthma:

#### Hospital Services

- ☐ Inpatient
- ☐ Emergency Department

#### Physician's Services

- ☐ Doctor visit
- ☐ Follow-up treatment
- ☐ Specialist
- ☐ Urgent office visit
- ☐ Urgent office visit medications
- ☐ Allergy testing
- ☐ Immunotherapy (allergy shots)
- ☐ Pulmonary function test in-office

#### Preventive Services

- ☐ Flu shot
- ☐ Pneumonia vaccine

#### Medications

- ☐ Rescue (bronchodilator)
- ☐ Controllers
- ☐ Antihistamines (if allergies trigger asthma)

#### Medical Equipment and Supplies

- ☐ Nebulizer rental, loan, or purchase
- ☐ Peak flow meter
- ☐ Spacer device and/or holding chamber

#### Radiology

- ☐ Chest x-ray

#### Screenings and Other Services

- ☐ Pulmonary function test off-site
- ☐ Annual follow-up Pulmonary Function Test (PFT)
- ☐ Asthma education
- ☐ Case management for severe or complicated asthma

#### Things to ask your health plan:

- ☐ What limitations exist for the services on this checklist?
- ☐ What would you pay out of pocket?
- ☐ Are the things on this list included in coverage?
- ☐ Is there a yearly or lifetime maximum benefit?

#### Consider the following:

- ☐ What is the likelihood of you or your family needing any particular service on a regular basis
- ☐ What is the level of coverage in emergency situations.

#### Additional and Specialist Services that May be Necessary

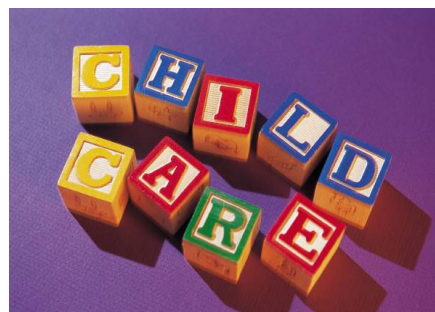
- ☐ Methacholine challenge test
- ☐ Histamine challenge test
- ☐ Bronchoscopy
- ☐ New or experimental medications
- ☐ Participating in pharmaceutical research



## Asthma at child care

The Utah Department of Health distributed an asthma care survey to child care facilities across Utah to assess their ability to manage asthma symptoms and attacks among children in their care. 281 facilities across 25 counties completed the survey. Results are as follows:

- All types of child care facilities (regular, hourly, residential, family license, other) reported an average of at least one child in their care with asthma.
- Hourly facilities were the most likely to report not knowing how many children in their care have asthma (36%) and that medications for treating children with asthma are unavailable onsite (67%).
- Only 41% of child care facilities reported that an asthma action plan is in place for each child with asthma.
- More than half of facilities indicated their staff need to receive additional training on asthma triggers and their management (59%) and how to handle an asthma attack (52%).
- When asked about their concerns regarding children with asthma, the largest concern given by respondents was that they would be unable to reach the children's parents in a time of need (40% of child care facilities said this was a concern).
- 66% of all facilities responded that they would like to receive additional information regarding management of children's asthma.
- DVD was the most preferred method of receiving additional asthma information and training (56% of facilities).



*Help young athletes with asthma be successful...take the 30-minute online course!*





If you or someone you care about has been affected by asthma, we want to hear from you! By sharing your story with the Utah Health Story Bank, you can help other Utahns who have been affected by this same health issue. Who knows? Maybe your story will be the one that helps increase awareness and promote better health in your community. Visit [www.health.utah.gov/asthma](http://www.health.utah.gov/asthma) to submit your story.



P.O. Box 142106  
Salt Lake City, Utah 84114-2106